UNITED STATES DISTRICT COURT EASTERN DISTRICT OF MISSOURI EASTERN DIVISION

DANIEL WAYNE ASKINS,)	
)	
Plaintiff,)	
)	
)	
v.)	No. 1:12-cv-00174-SPM
)	
CAROLYN W. COLVIN, ¹)	
Acting Commissioner of Social Security,)	
)	
Defendant.)	

JUDGMENT

In accordance with the Oral Opinion entered on September 6, 2013, a transcript of which is attached hereto,

IT IS HEREBY ORDERED, ADJUDGED, and DECREED that under Sentence 4 of 42 U.S.C. § 405(g), the final decision of the defendant Commissioner of Social Security denying disability insurance benefits and supplemental security income benefits to Plaintiff Daniel Wayne Askins is **REVERSED**. This action is remanded to the Defendant for further proceedings consistent with the court's Oral Opinion.

/s/Shirley Padmore Mensah SHIRLEY PADMORE MENSAH UNITED STATES MAGISTRATE JUDGE

Dated this 13th day of September, 2013.

¹ Carolyn W. Colvin became the Acting Commissioner of Social Security on February 14, 2013. Pursuant to Rule 25(d) of the Federal Rules of Civil Procedure, Carolyn W. Colvin should therefore be substituted for Michael J. Astrue as the defendant in this case.

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               UNITED STATES DISTRICT COURT
                EASTERN DISTRICT OF MISSOURI
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     DANIEL ASKINS,
             Plaintiff,
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                           Cause No. 1:12cv174 SPM
             VS.
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     SOCIAL SECURITY ADMINISTRATION,
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             Defendant.
     ______
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                    TRANSCRIPT OF RULING
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        BEFORE THE HONORABLE SHIRLEY PADMORE MENSAH
               UNITED STATES MAGISTRATE JUDGE
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                     SEPTEMBER 6, 2013
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                         APPEARANCES
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                  Cape Girardeau, MO 63703
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                        (573)331 - 8832
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        Proceedings Recorded by Electronic Recording
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1 (THE PROCEEDINGS BEGAN AT 1:36 P.M.) 2 THE COURT: Okay. We're back on the record in Askins V Colvin. Over the lunch hour I 3 did go back and reflect on our discussion this 4 5 morning and on the argument of counsel, and I am 6 prepared to rule at this time. The following oral opinion is 7 8 intended to be the opinion of the Court 9 judicially reviewing the denial of Plaintiff Daniel Wayne Askins' application for disability 10 insurance benefits and supplemental security 11 12 income under the Social Security Act. 13 The Court has jurisdiction over this 14 matter under 42 U.S.C. Section 405(g) and 1381. 15 The parties have consented to have a United States Magistrate Judge dispose of this case, 16 17 including entry of final judgment. I have reviewed and considered the 18 19 administrative record in its entirety, including 20 the briefs of the Plaintiff and the Commissioner, 21 the transcript of the hearing held before the 22 administrative law judge and the written opinion of the administrative law judge. 23 24 The Court has heard oral arguments 25 by counsel on the pleadings of the parties and

now issues its ruling in this oral opinion. 1 2 By way of background, Plaintiff Daniel Wayne Askins filed his application for 3 Title II and Title XVI benefits on September 8th, 4 2009 claiming he became disabled on January 1, 5 2006, at age 53. Plaintiff later amended the 6 7 onset date to November 20th, 2009, when he was 8 age 57. 9 In his application for benefits Plaintiff, who previously worked as a store 10 clerk, alleged disability due to a heart 11 12 condition, which caused breathing problems. 13 Plaintiff's application was 14 initially denied, and he requested a hearing 15 before an ALJ. On March 9th, 2011, Plaintiff 16 17 appeared and testified at a hearing before an 18 ALJ. 19 On April 15th, 2011, the ALJ issued 20 a written decision in which he concluded, as 21 summarized previously by the Court, that 22 notwithstanding a severe impairment of coronary artery disease, Plaintiff retains the residual 23 24 functional capacity to perform light work as 25 defined in 20 CFR Section 404.1567(b), but is

1 limited exertionally to occasionally climbing stairs, climbing ladders, kneeling, stooping 2 crouching, crawling and balancing. 3 The ALJ further found Plaintiff is 4 5 capable of performing his past relevant work as a store clerk, although not in the way Plaintiff 6 actually performed that work. 7 As such, the ALJ concluded Plaintiff 8 9 was not disabled. 10 Plaintiff's request for Appeals Council review of the ALJ's decision was denied, 11 and the decision of the ALJ stands as the final 12 decision of the Commissioner. 13 14 In his brief Plaintiff raised two issues for judicial review. First, Plaintiff 15 16 contended the hearing decision is not supported 17 by substantial evidence, because the ALJ failed 18 to properly evaluate the opinion of Plaintiff's treating cardiologist Dr. Craft. 19 20 Plaintiff's second argument was that 21 the hearing decision was not supported by 22 substantial evidence, because the ALJ also failed to properly evaluate the opinion of Nurse 23 Practitioner Corinna DeFrancesco as expressed in 24 25 a physical residual functional capacity

questionnaire completed by Nurse DeFrancesco. 1 More specifically, the Plaintiff 2 3 argued the ALJ's failure to even mention the opinion of Nurse DeFrancesco is reversible error 4 5 and warrants remand. In oral argument today Plaintiff 6 raised challenges for the first time to the ALJ's 7 credibility determination, past relevant work 8 9 analysis and the ALJ's evaluation of the opinion of Plaintiff's treating urologist Dr. Miller. 10 Although it appears that Plaintiff's 11 12 counsel raised these issues at least to some 13 extent in an effort to respond to arguments 14 raised in the Commissioner's cross brief, I do 15 agree with the Commissioner that it would be 16 unfair for the Court to consider these arguments 17 without giving the Commissioner a full opportunity to respond with supplemental 18 19 briefing. 20 However, as it will become evident 21 from my decision today, it's not necessary for 22 the Court to address those issues that were not 23 briefed by Plaintiff in order for me to resolve 24 this case. 25 As the parties are well aware, the

Court's role in reviewing the Commissioner's decision is to determine whether the decision complies with the relevant legal requirements and is supported by substantial evidence in the record as a whole. Substantial evidence is less than a preponderance but enough that a reasonable mind might accept it as adequate to support a conclusion.

In determining whether substantial evidence supports the Commissioner's decision the Court considers both evidence that supports the decision and evidence that detracts from that decision. However, the Court does not relay the evidence presented to the ALJ, and it defers to the ALJ's determinations regarding the credibility of testimony as long as those determinations are supported by good reasons and substantial evidence.

If after reviewing the record the Court finds it possible to draw two inconsistent positions from the evidence, and one of those positions represents the ALJ's findings, the Court must affirm the ALJ's decision. I've not cited the cases that state those standards. I know the parties are well aware and familiar

probably better than I am of the standards in the cases that articulate them.

with respect to the Plaintiff's second argument raised in his brief regarding Nurse DeFrancesco on June 9th, 2010, Nurse Practitioner Corinna DeFrancesco -- these are the facts that go to that argument. On June 9th, 2010, Nurse Practitioner Corinna DeFrancesco completed a physical residual functional capacity questionnaire.

The record reflects and the parties agree that Nurse DeFrancesco worked with Plaintiff's treating doctor, Dr. Lorna Stookey. The treatment notes of Nurse DeFrancesco were signed by -- co-signed by Dr. Stookey, and some of the notes reflect that Nurse DeFrancesco conferred with either Dr. Stookey or Dr. Craft's office at least on one occasion in her treatment of Plaintiff.

Nurse DeFrancesco's assessment, which appears to be based in part on written evaluations of Plaintiff's heart condition by Dr. Craft direct to Dr. Stookey, confirms that Plaintiff was diagnosed with hypertrophic obstructive cardiomyopathy, formerly known as

1 idiopathic hypertrophic sub-aortic stenosis. And 2 that condition is referenced in the records as HOCM and IHSS, among other things. 3 Nurse DeFrancesco's assessment notes 4 that Plaintiff's symptoms included chest pain 5 fatigue, shortness of breath and syncope --6 otherwise known as fainting, I believe. 7 8 Nurse DeFrancesco opined Plaintiff's 9 impairments had lasted or were expected to last at least 12 months, Plaintiff was not a 10 malingerer, and his impairments were reasonably 11 12 consistent with his symptoms. 13 The tracking -- much of the language 14 found in Dr. Craft's written evaluations Nurse 15 DeFrancesco opined that Plaintiff had the following functional limitations: Avoid warm-hot 16 17 environments and dehydration. Avoid activity that would create a Valsalvo effect such as 18 holding breath, lifting heavy objects, straining, 19 20 deep squats or frequent bending over as these 21 could cause sudden death. 22 Apparently, based on these limitations, she then concluded Plaintiff should 23 24 sit at least six hours in an eight-hour workday, 25 stand or walk about two hours in an eight-hour

1 workday, never lift 20 pounds and never stoop, bend, crouch, squat or climb ladders. 2 There appears to be no dispute 3 between the parties that these limitations if 4 5 accepted would preclude a finding that Plaintiff 6 had the residual functional capacity to perform light work. 7 Plaintiff has argued remand is 8 warranted because the hearing decision doesn't 9 10 even mention this opinion by Nurse DeFrancesco. 11 I agree with that argument. 12 As Plaintiff correctly points out in 13 his brief, evidence that Nurse DeFrancesco worked 14 with Plaintiff's primary care -- excuse me, Plaintiff's treating doctor, Lorna Stookey, and 15 16 evidence that Dr. Stookey co-signed most of Nurse 17 DeFrancesco's treatment notes suggests that Nurse 18 DeFrancesco may have been entitled to 19 treating-source status. 20 Although only acceptable medical sources can be considered treating sources 21 22 pursuant to 20 CFR 404.1502 and a nurse practitioner ordinarily would not be considered 23 24 an acceptable medical source, as Plaintiff points 25 out in the brief, in Shontos V Barnhart the

Eighth Circuit held that if an acceptable medical source oversees the care of patients, then the entire treatment team could have treating-source status.

The Commissioner has attempted to

distinguish this case -- our present case -- from Shontos by suggesting that the facts here are more in line with the facts of Tindell v.

Barnhart in which the Eighth Circuit held the opinion of a licensed social worker who counseled Plaintiff fairly regularly was not entitled to treating-source status. That argument is not availing.

The social worker in <u>Tindell</u> the Eighth Circuit held was not the treating source as defined in the regulations, and more particular to our point here, the Eighth Circuit found that the social worker there was not associated with a physician, psychologist or other acceptable medical source that could potentially give him treating-source status.

In light of the relationship between Nurse DeFrancesco and Plaintiff's primary treating doctor and in light of evidence in the record that Nurse DeFrancesco was part of the

treatment team to address Plaintiff's heart condition at a minimum the ALJ should have considered whether or not Nurse DeFrancesco was entitled to treating-source status.

Even if Nurse DeFrancesco was not entitled to treating-source status her opinion should have been considered by the ALJ. I don't think there's any dispute about that in this case.

Social Security Rule 06-03p states that since there is a requirement to consider all relevant evidence in an individual's case record, the case record should reflect the consideration of opinions from medical sources who are not, quote, acceptable medical sources and from nonmedical sources who have seen the claimant in their professional capacity.

Although there is a distinction between what an adjudicator must consider and what the adjudicator must explain in the disability determination or decision, the adjudicator generally should explain the weight given to opinions from those -- from these other sources or otherwise ensure that the discussion of the evidence in the determination or decision

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allows a claimant or subsequent reviewer to follow the adjudicator's reasoning when such opinions may have an effect on the outcome of the case. Here it is not at all clear from the hearing decision that the ALJ actually considered Nurse DeFrancesco's assessment, and if so, what weight, if any, he may have assigned to it. The Commissioner has acknowledged that Nurse DeFrancesco's opinion should have been considered as an other source, but suggests that the error was harmless. I disagree. Nurse DeFrancesco's opinion is significant, because it is the only medical opinion in the record that assesses the impact of Plaintiff's heart condition on his ability to function in the workplace. Notwithstanding the Commissioner's argument to the contrary during the hearing, the RFC assessment by the urologist Dr. Miller is not an assessment of what Plaintiff can do or how Plaintiff can function in the workplace despite his heart condition. In addition, the opinion by Plaintiff's cardiologist Dr. Craft that

Plaintiff's New York Heart Association classification was Class II is not the equivalent of an assessment in a disability context or Plaintiff's ability to function in the workplace in light of his heart condition.

As noted on the record during oral argument, there are cases where courts confronting this issue have held that, while the New York Heart Association classification may be relevant to determining whether or not an ALJ's RFC determination is supported by substantial evidence, that classification standing alone does not equate to a particular RFC assessment. And absent assistance from a medical expert an ALJ cannot competently translate a New York Heart Association classification into an actual residual functional capacity assessment.

In Lauer v. Apfel the Eighth Circuit held that the ALJ bears the primary responsibility for making the RFC determination and for ensuring that there is some medical evidence regarding the claimant's ability to function in the workplace that supports the RFC determination. Therefore, the Eighth Circuit has held the ALJ should obtain medical evidence that

addresses the claimant's ability to function in the workplace.

Here, other than Nurse DeFrancesco's assessment, it is unclear to me what medical evidence there is in the record that addresses the claimant's ability to function in the workplace. And I'm not persuaded that the evidence cited by the Commissioner both in his brief and at oral argument today rises to the level of medical evidence of claimant's ability to function in the workplace.

Because the ALJ erred in failing to consider Nurse DeFrancesco's opinion and because a finding -- and that error may have an effect on the outcome of the case, the hearing decision is not supported by substantial evidence, and the Commissioner's decision will be reversed and remanded for further proceedings.

On remand the ALJ should consider the opinion of Nurse DeFrancesco and consider whether it should be afforded treating-source status in light of the evidence in the record of her relationship to Dr. Stookey.

The ALJ should also consider going back to Dr. Craft for clarification or otherwise

enlisting the services of a medical expert who can assist in determining what functional limitations as that term is used in the context of disability insurance benefits might flow from Dr. Craft's NYHA classification assessment. I will enter a judgment on this oral opinion and will order a transcript only of this segment of the hearing today, the segment that covers the oral opinions, so the parties have a written memorialization of the Court's reasoning in this case. Nothing further. MS. DOROTHY: Thank you, Your Honor. THE COURT: Thank you. (PROCEEDINGS CONCLUDED AT 1:59 P.M.)

CERTIFICATE

I, Alison M. Garagnani, Registered Merit
Reporter, hereby certify that I am a duly
appointed Official Court Reporter of the United
States District Court for the Eastern District of
Missouri.

I further certify that the foregoing is a true and accurate transcript of the proceedings held in the above-entitled case. And I further certify that the foregoing pages contain an accurate reproduction from taped proceedings had on that date, transcribed to the best of my ability.

I further certify that this transcript contains pages 1 through 16 inclusive and that this reporter takes no responsibility for missing or damaged pages of this transcript when same transcript is copied by any party other than this reporter.

Dated Cape Girardeau, Missouri, this 12th day of September, 2013.

24 _______

/s/Alison M. Garagnani 25 Alison M. Garagnani, CCR, CSR, RMR. Official Court Reporter